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## **CONFIRMATION NO. 3146**

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** CONTINUING DATA ****  ** FOREIGN APPLICATIONS ***  IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ***  ** 10/31/2001									
				DRA	SHEETS TOT DRAWING CLAI 1 2		MS	INDEPENDENT CLAIMS 2	
ADDRESS Ben E. Lofstedt P.O. Box 4189 Fullerton ,CA 92	834						-		
TITLE  Method and apparatus for verification/authorization by credit or debit card owner of use of card concurrently with merchant transaction									
RECEIVED	FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT No for following:				TNU	☐ All Fees ☐ 1.16 Fees (Filing) ☐ 1.17 Fees (Processing Ext. of time) ☐ 1.18 Fees (Issue) ☐ Other ☐ Credit			